

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	6662.1	8/25
O.I.P.E. CLASSIFIER		45	8/30/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		49605	10-2-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 +- Restricted O Objected

Claim	Date
Final	
Original	
1	10/19/02
2	11/18/03
3	11/18/03
4	11/18/03
5	11/18/03
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49	11/18/03
50	11/18/03

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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